



**Family Center**  
**Forest Lake Area School District 831**  
**200 SW 4th Street**  
**Forest Lake MN 55025**

Please complete the form below as soon as possible, listing all adults and children residing in your household. Indicate birthdate by month, day and year. Mail or drop off at the Family Center or any Forest Lake School. For more information 651-982-8300.

**Head(s) of House:**

Last Name	First Name	Middle Name	Sex (M/F)	Birthdate
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Last Name	First Name	Middle Name	Sex (M/F)	Birthdate
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Street Address \_\_\_\_\_ Apt#/Lot# \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

**Other Adults:**

Last Name	First Name	Middle Name	Sex (M/F)	Birthdate
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Last Name	First Name	Middle Name	Sex (M/F)	Birthdate
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**Children:**

Last Name	First Name	Middle Name	Sex (M/F)	Birthdate
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